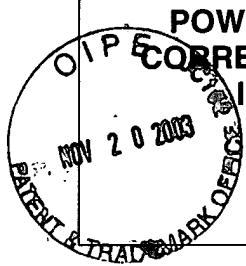


**POWER OF ATTORNEY and
CORRESPONDENCE ADDRESS
INDICATION FORM**



Application Number	10/634,742
Filing Date	August 4, 2003
First Named Inventor	Micha I Spaid
Title	Meth ds and Syst ms f r Monitoring M lecular Int ractions
Art Unit	1641
Examiner Name	
Attorney Docket Number	100/15901

I hereby appoint:

Practitioners associated with the Customer Number

021569

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number.

OR

The address associated with Customer Number _____

OR

Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the

Applicant.

Assignee of record of the entire interest (Certificate under 37 CFR 3.73(b) is enclosed)

SIGNATURE of Applicant or Assignee of Record

Name	Stephen E. Creager		
Signature	<i>Stephen E. Creager</i>		
Date	11/14/03	Telephone	(650) 623-0700

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date below.

Typed or printed name	Mich Ile Chan		
Signature	<i>Michelle Chan</i>	Date	November 17, 2003